

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

American Academy of Dermatology Association Political Action Committee (SkinPAC)

ADDRESS (number and street) ▼

1445 New York Avenue NW

Ste 800

☐ Check if different than previously reported. (ACC)

Washington

DC

20005

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00359539

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☒ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

09

01

2015

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

09

30

2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Steven Debnar

Signature of Treasurer

Steven Debnar

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

10

15

2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
09 01 2015 To: M M / D D / Y Y Y Y Y Y
09 30 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		94125.67
(b) Cash on Hand at Beginning of Reporting Period.....	151290.80	
(c) Total Receipts (from Line 19)	64956.90	644947.78
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	216247.70	739073.45
7. Total Disbursements (from Line 31)	29312.30	552138.05
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	186935.40	186935.40
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Report Covering the Period:

From:

09

01

2015

To:

09

30

2015

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

56997.99

595960.72

(ii) Unitemized

7958.91

46487.06

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

64956.90

642447.78

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ►

64956.90

642447.78

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

2500.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ►

64956.90

644947.78

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

64956.90

644947.78

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	312.30	14138.02
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	312.30	14138.02
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	29000.00	520500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	2500.03
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	2500.03
29. Other Disbursements	0.00	15000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	29312.30	552138.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29312.30	552138.05

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	64956.90	642447.78
34. Total Contribution Refunds (from Line 28(d))	0.00	2500.03
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	64956.90	639947.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	312.30	14138.02
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	312.30	14138.02

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 47

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. William B. Adams

Mailing Address 5850 Jamila River Dr

City

Venice

State

FL

Zip Code

34293-6676

FEC ID number of contributing
federal political committee.

C

Name of Employer

SkinSmart Dermatology

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 13 / 2015

Transaction ID : 9072B083-3A46-4749-

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Adewole Shomari Adamson

Mailing Address 410 Market St

Cb#7715, Ste 400

City

Chapel Hill

State

NC

Zip Code

27516-4061

FEC ID number of contributing
federal political committee.

C

Name of Employer

UNC Department of Dermatology

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 13 / 2015

Transaction ID : AC35A5A3-DD14-499D-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Tina S. Alster

Mailing Address 1430 K St NW

Ste 200

City

Washington

State

DC

Zip Code

20005-2504

FEC ID number of contributing
federal political committee.

C

Name of Employer

Washington Inst. of Derm. Laser Surgeon

Occupation

Physician; Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 29 / 2015

Transaction ID : 45594C54-3B75-4E18-

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Brock A. Andersen

Mailing Address 5016 Sarah Ct

City

Fruitland

State

ID

Zip Code

83619-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer

Snake River Dermatology

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 15 / 2015

Transaction ID : F3F85EDEFB67C679680

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Gina Charlene Ang

Mailing Address 810 Pinecrest Ave SE

City

Grand Rapids

State

MI

Zip Code

49506-3435

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 29 / 2015

Transaction ID : 9C4AB19909DBB0DC480

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Maryam Mandana Asgari

Mailing Address 33 La Cresta Rd

City

Orinda

State

CA

Zip Code

94563-4143

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mass General Hospital

Occupation

Research Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 28 / 2015

Transaction ID : 05CD3F82B6C14AB810B

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

775.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Jay M. Barnett

Mailing Address 11704 Lake Potomac Dr

City

Potomac

State

MD

Zip Code

20854-1219

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greater Washington Dermatology, PA

Occupation

Physician

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2015

Transaction ID : 1969F0F2A2B48ABAF43

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Matthew D. Barrows

Mailing Address 1790 N Stonebridge Dr

City

McKinney

State

TX

Zip Code

75071-7437

FEC ID number of contributing
federal political committee.

C

Name of Employer

Derm & Skin Cancer Surgery Center

Occupation

Dermatologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2015

Transaction ID : 71C2C4DB-7C84-432A-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Benjamin D. Bernstein

Mailing Address 5136 Elder Rd

City

Hydes

State

MD

Zip Code

21082-9550

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bernstein & Robinson Dermatology, PA

Occupation

Physician

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2015

Transaction ID : 3D150421CABFAC90D2B

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1500.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Lawrence E. Blanchard

Mailing Address 4101 Sulgrave Rd

City

Richmond

State

VA

Zip Code

23221-3331

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dermatology Associates of Virginia

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2015
Transaction ID : 8F01E562E9975A0EC39

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Michael J. Bond

Mailing Address 2112 W. 35th Street

City

Kearney

State

NE

Zip Code

68845

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2015
Transaction ID : BB639308ADC00C25E5A

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Sharon Blakeley Bond

Mailing Address 2112 W 35th St

City

Kearney

State

NE

Zip Code

68845-2712

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2015
Transaction ID : E556E7FE0F216C68169

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

1000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Clarence William Brown Jr.

Mailing Address 171 W Goethe St

City

Chicago

State

IL

Zip Code

60610-1914

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Joseph Dermatology

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 15 / 2015

Transaction ID : F66D0FDDDB16D951CC15

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Mark Alan Chastain

Mailing Address 3873 Dumbarton Rd NW

City

Atlanta

State

GA

Zip Code

30327-2619

FEC ID number of contributing
federal political committee.

C

Name of Employer

Skin Cancer Specialists, P.C.

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

09 / 29 / 2015

Transaction ID : 82DF58C1C11633765B5

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Clay J. Cockerell

Mailing Address 4312 Arcady Ave

City

Dallas

State

TX

Zip Code

75205-3704

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cockerell Dermatopathology

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3749.94

Date of Receipt

09 / 15 / 2015

Transaction ID : 9D80CE2FF219BDD294B

Amount of Each Receipt this Period

416.66

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5516.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Brett M. Coldiron

Mailing Address 1105 River Hill Dr

City

Covington

State

KY

Zip Code

41011-1123

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Skin Cancer Center

Occupation

Physician

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

3749.94

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : 9DF28DA8B096975F90F

Amount of Each Receipt this Period

416.66

Full Name (Last, First, Middle Initial)

B. David Andrew Cowan

Mailing Address 1283 Beechwood Blvd

City

Pittsburgh

State

PA

Zip Code

15206-4542

FEC ID number of contributing
federal political committee.

C

Name of Employer

BHS Dermatology

Occupation

Physician

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : F868ABFD32C1DBFB729

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Scott Edmondson CraterMailing Address 8381 Riverwalk Park Blvd
Ste 101

City

Fort Myers

State

FL

Zip Code

33919-8760

FEC ID number of contributing
federal political committee.

C

Name of Employer

Associates in Dermatology

Occupation

Dermatologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 24 / 2015

Transaction ID : C9709015-BD20-4B7C-

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1116.66

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Jeffrey J. CrowleyMailing Address 5101 Commerce Dr
Ste 101

City	State	Zip Code
Bakersfield	CA	93309-0412

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bakersfield Dermatology

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2015

Transaction ID : 46545B52-1D0A-4D2A-

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Amy J. DerickMailing Address 1531 S Grove Ave
Unit 101

City	State	Zip Code
Barrington	IL	60010-5250

FEC ID number of contributing
federal political committee.

C

Name of Employer

Derick Dermatology Barrington

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2015

Transaction ID : 533838FB827DE200ED8

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Anna Katherine W. Duckworth

Mailing Address 815 Old Stevens Creek Rd

City	State	Zip Code
Martinez	GA	30907-9228

FEC ID number of contributing
federal political committee.

C

Name of Employer

Savannah River Dermatology

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2015

Transaction ID : 01E20F7C408FE2A1ADA

Amount of Each Receipt this Period

365.00

SUBTOTAL of Receipts This Page (optional)..... ►

2115.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 13 OF 47
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Karen E. Edison

Mailing Address 1 Hospital Dr

Department of Dermatology, Rm MA11

City	State	Zip Code
Columbia	MO	65212-1000

FEC ID number of contributing
federal political committee.

C

Name of Employer

Univ of Missouri Medical Center

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2015

Transaction ID : BDCDF08F-1E82-4A5C-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Douglas Jackson FifeMailing Address 6460 Medical Center St
Ste 350

City	State	Zip Code
Las Vegas	NV	89148-2423

FEC ID number of contributing
federal political committee.

C

Name of Employer

Surgical Dermatology and Laser Center

Occupation

Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2015

Transaction ID : 2FB71CD6-440A-43E1-

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Eric M. Finley

Mailing Address 219 Sena Dr

City	State	Zip Code
Metairie	LA	70005-3341

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2015

Transaction ID : 4662E5E7FE378C7AE04

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

5750.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 47

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Stephen H. Flax

Mailing Address 795 Johnston Ct

City
Winchester

State
VA

Zip Code
22601-6718

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2015

Transaction ID : 4CF8FA30-B8FE-4D78-

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Julia Griffin Girard

Mailing Address 202 Sherwood Rd SW

City
Rome

State
GA

Zip Code
30165-4234

FEC ID number of contributing
federal political committee.

C

Name of Employer

Harbin Clinic

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 29 / 2015

Transaction ID : 69FCAE22-DF0D-4EC7-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Scott Goffin

Mailing Address 44 Kalliste HI

City
Great Barrington

State
MA

Zip Code
01230-1182

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dermatology Center in the Berkshires

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 13 / 2015

Transaction ID : 4945A9AE5B32D621180B

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

800.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 47

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. David C. Gorsulowsky

Mailing Address 147 Degas Rd

City

Portola Valley

State

CA

Zip Code

94028-7708

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fremont Dermatology

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	1	5

Transaction ID : 05C8DB495325EF0680C

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Steven Jay GoulderMailing Address 500 W Superior St
Unit 905

City

Chicago

State

IL

Zip Code

60654-8135

FEC ID number of contributing
federal political committee.

C

Name of Employer

Midwest Skin Cancer Institute, LLC

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	1	5

Transaction ID : EF7CC114-0AC6-4227-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Barbara Greenan

Mailing Address 9418 Balfour Drive

City

Bethesda

State

MD

Zip Code

20814

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Academy Of Dermatology

Occupation

Association Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	1	5

Transaction ID : 380F5D385677E7CF4FC

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)..... ►

1045.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 16 OF 47
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Michael Alan Greenberg

Mailing Address 920 Suffield Ter.

City	State	Zip Code
Northbrook	IL	60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Illinois Dermatology Institute, LLCOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09	/	15	/	2015

Transaction ID : 1FE0BC40D7B25623A8B

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Alexander S. Gross

Mailing Address 1050 Spalding Club Ct

City	State	Zip Code
Dunwoody	GA	30338-2623

FEC ID number of contributing
federal political committee.

C

Name of Employer
Georgia Dermatology CenterOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09	/	22	/	2015

Transaction ID : F6873BD553BEE979162

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Kenneth Grossman

Mailing Address 31 Windsor Dr

City	State	Zip Code
Little Silver	NJ	07739-1354

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation
Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09	/	29	/	2015

Transaction ID : E7959483882CFBA0DD4

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1550.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Suhail Muhsin Hadi

Mailing Address 23 Metro Vista Dr

City

Hawthorne

State

NJ

Zip Code

07506-3432

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Dermatologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 30 / 2015

Transaction ID : DB1A15E9-C7DE-4BC9-

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Mark A. Hall

Mailing Address 388 SW Bluff Dr

City

Bend

State

OR

Zip Code

97702-1360

FEC ID number of contributing
federal political committee.

C

Name of Employer

Central Oregon Dermatology

Occupation

Dermatologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

251.00

Date of Receipt

09 / 29 / 2015

Transaction ID : 2E934B80-DBC1-44F4-

Amount of Each Receipt this Period

251.00

Full Name (Last, First, Middle Initial)

C. Ronald Douglas Hall

Mailing Address 547 Cedar Creek Rd
Unit A1

City

Pikeville

State

KY

Zip Code

41501-1439

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Physician

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 29 / 2015

Transaction ID : 57CE0B0738BCE45698F

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1051.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. David T. Harvey

Mailing Address 107 Kellsworth Way

City State Zip Code
 Tyrone GA 30290-2902

FEC ID number of contributing federal political committee.

C

Name of Employer
 Dermatology Institute For Skin Cancer

Occupation
 Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.03

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 11 / 2015

Transaction ID : 4D5182E268F8C5DF0B6A

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

B. Dale H. Isaacson

Mailing Address 1828 L St NW
 Ste 850

City State Zip Code
 Washington DC 20036-5111

FEC ID number of contributing federal political committee.

C

Name of Employer
 Drs. Isaacson & Berzin LLC

Occupation
 Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 11 / 2015

Transaction ID : 72066733-B0C8-4E5B-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Vivek Iyengar

Mailing Address 627 E 6th St

City State Zip Code
 Hinsdale IL 60521-4712

FEC ID number of contributing federal political committee.

C

Name of Employer

Self Employed

Occupation
 Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 24 / 2015

Transaction ID : 5C97FD29-640A-451E-

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5541.67

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Elizabeth Sanders Jacobson

Mailing Address 250 Inverness Center Dr
 Offices of Beaumont Village

City Birmingham State AL Zip Code 35242-4834

FEC ID number of contributing
federal political committee.

C

Name of Employer
Inverness Dermatology

Occupation
Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 09 / 25 / 2015

Transaction ID : 6129701A-3321-4559-

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

B. Laurie G. Jacobson

Mailing Address 1000 82nd Ave NE

City Medina State WA Zip Code 98039-4736

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Dermatology & Cosmetic Center

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 09 / 24 / 2015

Transaction ID : DDCBA315D7DB8FAD78E

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Timothy Mark Jochen

Mailing Address 42600 Mirage Rd

City Rancho Mirage State CA Zip Code 92270-4127

FEC ID number of contributing
federal political committee.

C

Name of Employer
Contour Dermatology

Occupation
Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 09 / 22 / 2015

Transaction ID : EED8B8A9-A529-4774-

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1850.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Helen Y. Kim-James

Mailing Address 100 Chesterfield Business Pkwy
 Ste 110

City State Zip Code
 Chesterfield MO 63005-1271

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 Chesterfield Valley Dermatology, PC

Occupation
 Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 07 / 2015

Transaction ID : 4B9EA8BD31DB2CB058AF

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Hazle Smith Konerding

Mailing Address 205 Cyril Ln

City State Zip Code
 Richmond VA 23229-7740

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 Commonwealth Dermatology PC

Occupation
 Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.03

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : EC22D0C26BC237EA64C

Amount of Each Receipt this Period

416.67

Full Name (Last, First, Middle Initial)

C. Arash Koochek

Mailing Address 512 N McClurg Ct
 Apt 2901

City State Zip Code
 Chicago IL 60611-4167

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Self Employed

Occupation
 Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 28 / 2015

Transaction ID : B51B6599D861739DAE0

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

966.67

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 47
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Craig A. Kornreich

Mailing Address 20 Fairbanks Blvd

City	State	Zip Code
Woodbury	NY	11797-2619

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self Employed

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2015

Transaction ID : 406890F5859C2B5BAB3E

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Carrie L. KovarikMailing Address 3600 Spruce St
Department of Derm 2 Maloney Build

City	State	Zip Code
Philadelphia	PA	19104-4211

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Univ of Pennsylvania

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2015

Transaction ID : 2D8A0BD0-357F-4A50-

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Louis KuchnirMailing Address 340 Maple St
Ste 203

City	State	Zip Code
Marlborough	MA	01752-3200

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Kuchnir Dermatology & Dermatologic Sur

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	24	/	2015

Transaction ID : 9A4CC278-2658-457B-

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)..... ►

700.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Andrew P. Lazar

Mailing Address 4544 Westhall Dr NW

City

Washington

State

DC

Zip Code

20007-3526

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 21 / 2015

Transaction ID : CA5EC789-7892-437A-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Phillip H. A. Lee

Mailing Address 2195 Las Lunas St

City

Pasadena

State

CA

Zip Code

91107-2421

FEC ID number of contributing
federal political committee.

C

Name of Employer

Center for Advanced Dermatology

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 29 / 2015

Transaction ID : 865AF721AFDDEE56C59

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. William T. Long

Mailing Address 71 Park Ave

City

New York

State

NY

Zip Code

10016-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 29 / 2015

Transaction ID : 543C84C81E805E38330

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1300.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 47

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Mark H. LowittMailing Address 6565 N Charles St
Ste 315

City	State	Zip Code
Baltimore	MD	21204-5804

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self Employed

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2015

Transaction ID : F160B176-EE9C-4BFF-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mac Lee MachanMailing Address 6460 Medical Center
Suite 350

City	State	Zip Code
Las Vegas	NV	89148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Surgical Dermatology and Laser Center

Surgical Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2015

Transaction ID : 7EB2D0FA6AFBA3C145D

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Karen R. Maffei

Mailing Address 1056 Tangle Ct

City	State	Zip Code
Athens	GA	30606-5742

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self Employed

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2015

Transaction ID : CDEF94AC-C96F-471A-

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1050.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Nancy L. Marchell

Mailing Address PO Box 15465

City

West Palm Beach

State

FL

Zip Code

33416

FEC ID number of contributing
federal political committee.

C

Name of Employer

Palm Beach Dermatology Group

Occupation

Mohs Surgeon

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 18 / 2015

Transaction ID : 5905E25F4285F18C00F

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Kenneth A. Mark

Mailing Address 425 County Road Suite 201

City

Southampton

State

NY

Zip Code

11968

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Dermatologist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 30 / 2015

Transaction ID : 1CEB4D5363394C7A13F

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Elizabeth Shannon Martin

Mailing Address 861 Tulip Poplar Dr

City

Hoover

State

AL

Zip Code

35244-1639

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pure Dermatology & Aesthetics, PC

Occupation

Dermatologist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 15 / 2015

Transaction ID : 7CCEE3F12022F44631E

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

850.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Renee J. Mathur

Mailing Address 912 Sunnehanna Dr

City

Johnstown

State

PA

Zip Code

15905-2135

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2015

Transaction ID : EDD0FE5A6151B553CD1

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Oswald L. Mikell

Mailing Address 29 Dory Ct

City

Bluffton

State

SC

Zip Code

29909-4308

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dermatology Associates of the Lowcount

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2015

Transaction ID : 624FB510-DC96-4B3A-

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

c. Stanley J. Miller

Mailing Address 25 Blythewood Rd

City

Baltimore

State

MD

Zip Code

21210-2401

FEC ID number of contributing
federal political committee.

C

Name of Employer

Charles Towson Building

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2015

Transaction ID : 0D967AFEF0BD8497E0

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

1350.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Vineet Mishra
 Mailing Address 300 E Basse Rd
 Apt 1535

City	State	Zip Code
San Antonio	TX	78209-8392

FEC ID number of contributing federal political committee.

C

Name of Employer

University of Texas Health Science Cen

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2015

Transaction ID : 210E588987D841F605E

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Maureen Ann Mooney

Mailing Address 2407 SW 149th Pl

City	State	Zip Code
Burien	WA	98166-1624

FEC ID number of contributing federal political committee.

C

Name of Employer

Cascade Eye & Skin Centers

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2015

Transaction ID : 0EC8F20C90F55B5324D

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Eliot N. Mostow
 Mailing Address 566 White Pond Dr
 Ste E

City	State	Zip Code
Akron	OH	44320-1116

FEC ID number of contributing federal political committee.

C

Name of Employer

Akron Dermatology

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2015

Transaction ID : B76ABC56-06F2-4110-

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional).....▶

1050.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Peter Muz

Mailing Address 55 Wendell St

City

Cambridge

State

MA

Zip Code

02138-1927

FEC ID number of contributing
federal political committee.

C

Name of Employer

Adult & Pediatric Dermatology

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 25 / 2015

Transaction ID : 9323F996-03D1-4362-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Harold D. New

Mailing Address 14473 Wallace Pike

City

Abingdon

State

VA

Zip Code

24210-8190

FEC ID number of contributing
federal political committee.

C

Name of Employer

MSMG Dermatology of Abingdon

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 18 / 2015

Transaction ID : 48069E8700EF5250F3B0

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Amit G. Pandya

Mailing Address 5323 Harry Hines Blvd
Stop 9190

City

Dallas

State

TX

Zip Code

75390-9190

FEC ID number of contributing
federal political committee.

C

Name of Employer

Univ of TX Southwestern Medical Center

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

09 / 29 / 2015

Transaction ID : B0A2C88C-F12B-4C8C-

Amount of Each Receipt this Period

251.00

SUBTOTAL of Receipts This Page (optional)..... ►

801.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Daniel J. Parsons

Mailing Address 3105 Willow Oak Rd

City

Charlotte

State

NC

Zip Code

28209-1517

FEC ID number of contributing
federal political committee.

C

Name of Employer

Charlotte Medical Clinic

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 15 / 2015

Transaction ID : 62841B9B98DCB1959B2

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Llewellyn Phillips II

Mailing Address 4509 Talbot Road

City

Renton

State

WA

Zip Code

98055

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2015

Transaction ID : 2CDC490BDB6B08DDC05

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Christine Poblete-Lopez

Mailing Address 27764 Berringer Run

City

Westlake

State

OH

Zip Code

44145-3037

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cleveland Clinic Foundation

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 15 / 2015

Transaction ID : A43C9682CF29BAE8C99

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 47

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Marisa PotterMailing Address 21205 NE 37th Ave
Apt 310City State Zip Code
Aventura FL 33180-4052FEC ID number of contributing
federal political committee.

C

Name of Employer

Advanced Dermatology & Cosmetic Surgeon

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2015

Transaction ID : D9084E18-BBC0-45A7-

Amount of Each Receipt this Period

260.00

Full Name (Last, First, Middle Initial)

B. Stephen M. PurcellMailing Address 1259 S Cedar Crest Blvd
Ste 100City State Zip Code
Allentown PA 18103-6373FEC ID number of contributing
federal political committee.

C

Name of Employer

Advanced Dermatology Associates LTD

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2015

Transaction ID : E1777495-8155-4796-

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Scott C. RackettMailing Address 2809 N Sepulveda Blvd
Ste ACity State Zip Code
Manhattan Beach CA 90266-2727FEC ID number of contributing
federal political committee.

C

Name of Employer

Manhattan Beach Dermatology

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : B3FB5769-97D9-43F7-

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1760.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 47

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Vail C. ReeseMailing Address 450 Sutter St
Rm 830

City	State	Zip Code
San Francisco	CA	94108-3915

FEC ID number of contributing
federal political committee.

C

Name of Employer

Union Square Dermatology

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	16	/	2015

Transaction ID : 71EC5B50-B9B5-459E-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Jack S. Resneck Jr.

Mailing Address 312 H St

City	State	Zip Code
San Rafael	CA	94901-1729

FEC ID number of contributing
federal political committee.

C

Name of Employer

UCSF Department of Dermatology

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2015

Transaction ID : 2EBCC3349B33C8FC76A

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

C. Hobart K. Richey

Mailing Address 443 Anchorage Dr

City	State	Zip Code
Nokomis	FL	34275-3102

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2015

Transaction ID : 204063B23CF184BA4CB

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1225.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Joan M. Rindler

Mailing Address 5719 Spring Hill Dr

City	State	Zip Code
Ann Arbor	MI	48105-9552

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2015

Transaction ID : 898C7D153C5AAD443B2

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Patricia K. RoddeyMailing Address 4525 Cameron Valley Pkwy
Ste 2100

City	State	Zip Code
Charlotte	NC	28211-4375

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mecklenberg Medical Group

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2015

Transaction ID : B6EA367D-DD04-4C5F-

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Adrian O. Rodriguez

Mailing Address 719 Brownlee Dr

City	State	Zip Code
Nashville	TN	37205-3142

FEC ID number of contributing
federal political committee.

C

Name of Employer

Nashville Skin & Cancer

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2015

Transaction ID : 4DC004694AD8EE31D80

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

1500.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Heather Rogers

Mailing Address 1024 E Shelby St

City
SeattleState
WAZip Code
98102-3821FEC ID number of contributing
federal political committee.

C

Name of Employer
Modern DermatologyOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	5

Transaction ID : 6FB3DA1661DF60E64FF

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Nicole Elaine RogersMailing Address 701 Metairie Rd
Ste 2A205City
MetairieState
LAZip Code
70005-4061FEC ID number of contributing
federal political committee.

C

Name of Employer
Self EmployedOccupation
Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	5

Transaction ID : 54A118B0-0BC8-466C-

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Anthony RossiMailing Address 535 W 23rd St
Apt N7LCity
New YorkState
NYZip Code
10011-1130FEC ID number of contributing
federal political committee.

C

Name of Employer
Memorial Sloan Kettering Cancer CenterOccupation
Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	1	5

Transaction ID : DDA27DF968D83F1D186

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

1000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Neil S. Sadick

 Mailing Address 911 Park Ave
 Apt 1A

City	State	Zip Code
New York	NY	10075-0385

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Sadick Dermatology

Occupation

Dermatologist

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2015

Transaction ID : 9857A102-63CC-4C75-

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

B. Jordan Schwartzberg

Mailing Address 7721 Newport Ln

City	State	Zip Code
Parkland	FL	33067-2341

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Boca Raton Skin Institute

Occupation

Physician

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	16	/	2015

Transaction ID : D9C69F56-0386-470F-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Jared M. Scott

Mailing Address 1906 S Vista Ave

City	State	Zip Code
Boise	ID	83705-3453

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Idaho Skin Surgery Center, PC

Occupation

Physician

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	16	/	2015

Transaction ID : 5C4B8319-49D3-44C8-

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1750.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Linda J. SheuMailing Address 3 Medical Plaza Dr
Ste 230

City	State	Zip Code
Roseville	CA	95661-3088

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sutter Medical Group

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : 99F93F44-BED1-4430-

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Daniel M. Siegel

Mailing Address 33 Hitherbrook Rd

City	State	Zip Code
Saint James	NY	11780-1014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Long Island Skin Cancer And Dermatolog

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3749.94

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2015

Transaction ID : 53641108B80A82D815A

Amount of Each Receipt this Period

416.66

Full Name (Last, First, Middle Initial)

C. David J. SireMailing Address 301 W Bastanchury Rd
Ste 210

City	State	Zip Code
Fullerton	CA	92835-3424

FEC ID number of contributing
federal political committee.

C

Name of Employer

Advanced Skincare MedCenter

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2015

Transaction ID : ED156BC9-DA02-4057-

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1166.66

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Jason L. Smith

Mailing Address 86 Reynolds Bend Dr SE

City

Rome

State

GA

Zip Code

30161-9194

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwest Georgia Dermatology

Occupation

Dermatologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2015

Transaction ID : A1DEE0778FFDF34B289

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Richard Lee Spielvogel

Mailing Address 649 Dorset Rd

City

Devon

State

PA

Zip Code

19333-1868

FEC ID number of contributing
federal political committee.

C

Name of Employer

Institute for Dermpath

Occupation

Dermatologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : 6A53399C-BDF2-4D4C-

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Karan K. Sra

Mailing Address 527 Columbia St

City

Houston

State

TX

Zip Code

77007-2625

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dermatological Assoc of Texas

Occupation

Dermatologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : 8F6877C981556B95168

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)..... ►

3000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 47

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Monika SrivastavaMailing Address 870 Palisade Ave
Ste 302

City Teaneck State NJ Zip Code 07666-3446

FEC ID number of contributing
federal political committee.

C

Name of Employer

Advanced Laser and Skin Cancer Center

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 29 / 2015**Transaction ID : 5F81BF33-7809-4824-**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Ronnit H. SteinMailing Address 5210 Linton Blvd.
Suite 307

City Delray Beach State FL Zip Code 33484-6500

FEC ID number of contributing
federal political committee.

C

Name of Employer

Palm Beach Dermatology Group

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 25 / 2015**Transaction ID : ED952D093FE3F81A580**

Amount of Each Receipt this Period

251.00

Full Name (Last, First, Middle Initial)

C. Kristen M. A. Stewart

Mailing Address 230 Lora St

City Neptune Beach State FL Zip Code 32266-4941

FEC ID number of contributing
federal political committee.

C

Name of Employer

Advanced Dermatology and Cosmetic Surg

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 29 / 2015**Transaction ID : BA083768-B49D-4093-**

Amount of Each Receipt this Period

275.00

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1026.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 47

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Michael Sean StrotherMailing Address 12911 120th Ave NE
Ste G100

City	State	Zip Code
Kirkland	WA	98034-3027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self Employed

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2015

Transaction ID : 98E69FB6-9483-4544-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mohiba Khan Tareen

Mailing Address 3021 E Calhoun Pkwy

City	State	Zip Code
Minneapolis	MN	55408-2520

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Tareen Dermatology

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2015

Transaction ID : F80AED56-50A3-4E09-

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

c. Claudia P. Taylor

Mailing Address 01225 SW Mary Failing Dr

City	State	Zip Code
Portland	OR	97219-8347

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Dermatology Professionals

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	20	/	2015

Transaction ID : 47E08E73C50E9BBAADB

Amount of Each Receipt this Period

41.67

SUBTOTAL of Receipts This Page (optional)..... ►

841.67

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 47

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Marta Jane Van Beek

Mailing Address 315 Woolf Ave

City

Iowa City

State

IA

Zip Code

52246-2442

FEC ID number of contributing
federal political committee.

C

Name of Employer

Univ of Iowa Hospitals and Clinics

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	1	5

Transaction ID : ACDB3C65E146DABDEFE

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Jennifer L. VesperMailing Address 300 Riverside Dr E
Ste 2200

City

Bradenton

State

FL

Zip Code

34208-1023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Riverside Medical Center

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	1	5

Transaction ID : A1D12C5F-738F-4BF7-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Juliann S. Wallner

Mailing Address 205 Page Rd

City

Pinehurst

State

NC

Zip Code

28374-8749

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pinehurst Medical Clinic

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	1	5

Transaction ID : 53BA9180-0E22-42EE-

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1050.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

PAGE 39 OF 47

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Rita Weinstein

Mailing Address 51 Yorktown Rd

City

East Brunswick

State

NJ

Zip Code

08816-3305

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Self Employed

Occupation

Physician

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2015

Transaction ID : D34BBE969B25F7553F9

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. John R. West

Mailing Address 5 Egret Rd

City

Mystic

State

CT

Zip Code

06355-3295

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Seaport Dermatology & Mohs Surgery Cen

Occupation

Physician

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2015

Transaction ID : B2F02DDCF4015C32BEE

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Angela Booth Wingfield

Mailing Address 915 E Scenic Dr

City

Pass Chris

State

MS

Zip Code

39571-4701

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

The Dermatology Clinic, PLLC

Occupation

Physician

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2015

Transaction ID : 2D2888321FE86EC9D74

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1750.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 47

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Cyndi Jill Yag-HowardMailing Address 1000 Goodlette Rd N
Ste 100

City	State	Zip Code
Naples	FL	34102-5474

FEC ID number of contributing
federal political committee.

C

Name of Employer

Yag-Howard Dermatology Center

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2015

Transaction ID : AC528E38-A059-45BC-

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Thomas C. Yu

Mailing Address 9707 Glynshire Way

City	State	Zip Code
Potomac	MD	20854-2047

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Dermatology Center and Rockledge M

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2015

Transaction ID : FA9F1AB8-1533-45A8-

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Lisa D. Zack

Mailing Address 586 Yucca Rd

City	State	Zip Code
Naples	FL	34102-5107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Director, MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2015

Transaction ID : 4AC3C91FB936E688F8A

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1750.00

TOTAL This Period (last page this line number only)..... ►

56997.99

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53852

City State Zip Code
Phoenix AZ 85072
Purpose of Disbursement
Amex Fees

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 01 2015

Transaction ID : V927AA35EB542B083FE4

Amount of Each Disbursement this Period

51.94

Full Name (Last, First, Middle Initial)

B. Merchant Services

Mailing Address PO Box 6603

City State Zip Code
Hagerstown MD 21741
Purpose of Disbursement
VS/MC Fees

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 01 2015

Transaction ID : VF1419DC010831BE5C95

Amount of Each Disbursement this Period

123.99

Full Name (Last, First, Middle Initial)

C. Merchant Services

Mailing Address PO Box 6603

City State Zip Code
Hagerstown MD 21741
Purpose of Disbursement
Paypal fees

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 27 2015

Transaction ID : VAF8CE10426A9CA7F20E

Amount of Each Disbursement this Period

136.37

SUBTOTAL of Disbursements This Page (optional)..... ►

312.30

TOTAL This Period (last page this line number only)..... ►

312.30

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Bill Flores for Congress

Mailing Address PO Box 6207

City	State	Zip Code
Bryan	TX	77805

Purpose of Disbursement
2016 Primary

011

Candidate Name

William H. FloresCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 17

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	24	/	2015

Transaction ID : C9E03F5E6D79F60A568

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Blumenauer for Congress

Mailing Address 232 NE 9th

City	State	Zip Code
Portland	OR	97232

Purpose of Disbursement
2016 Primary

011

Candidate Name

Earl Francis BlumenauerCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: OR District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	24	/	2015

Transaction ID : FD2A76A6E9A47250805

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Blumenthal for ConnecticutMailing Address 777 Summer Street Ste 103
C/O Cacace Tusch & Santagata

City	State	Zip Code
Stamford	CT	06901

Purpose of Disbursement
2016 General

011

Candidate Name

Richard BlumenthalCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: CT District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	01	/	2015

Transaction ID : 3EA39B1594FC75B1009

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Committee To Re-Elect Linda Sanchez

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2015

Mailing Address 410 1st St SE
Suite 310

City Washington State DC Zip Code 20003

Purpose of Disbursement
2016 Primary

011

Transaction ID : 24B3B2874FA8C2F0D48

Amount of Each Disbursement this Period

1000.00

Candidate Name

Linda T. SanchezCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: CA District: 38Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. David Scott for Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	24	/	2015

Mailing Address PO Box 960821

City Riverdale State GA Zip Code 30296

Purpose of Disbursement
2016 Primary

011

Transaction ID : 54817C91CB0CAA4E4F1

Amount of Each Disbursement this Period

1500.00

Candidate Name

David Albert ScottCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: GA District: 13Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Friends of Pat Toomey

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	24	/	2015

Mailing Address 228 S. Washington St., Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
2016 Primary

011

Transaction ID : 78BDD3A1A23128CDC59

Amount of Each Disbursement this Period

1500.00

Candidate Name

Patrick Joseph ToomeyCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ President
State: PA District:Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Hudson for Congress

Mailing Address PO Box 5053

City Concord	State NC	Zip Code 28027-1500
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Purpose of Disbursement
2016 Primary

011

Candidate Name

Richard Lane Hudson Jr.Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2015

Transaction ID : 27B824D74EF1EEE493B

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Jason Smith for Congress

Mailing Address PO Box 1324

City Cape Girardeau	State MO	Zip Code 63702-1324
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Purpose of Disbursement
2016 Primary

011

Candidate Name

Jason Thomas SmithCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: MO District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2015

Transaction ID : 368B461BDD970488E67

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Lead Your Nation Now PAC (LYNN PAC)

Mailing Address PO Box 1872

City Topeka	State KS	Zip Code 66601
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Purpose of Disbursement
2015 Contribution

011

Candidate Name

Lead Your Nation Now PAC (LYNN PAC)Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2015
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	24	/	2015

Transaction ID : 50D2680222D608E4ADF

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Making America Prosperous PAC

Mailing Address PO Box 2485

City
SpringfieldState
VAZip Code
22152-0485Purpose of Disbursement
2015 Contribution

011

Candidate Name

Making America Prosperous PAC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2015

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2015

Transaction ID : 467F10188271E598005

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Matsui for Congress

Mailing Address PO Box 1738

City
SacramentoState
CAZip Code
95812Purpose of Disbursement
2016 Primary

011

Candidate Name

Doris O. Matsui

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2015

Transaction ID : 41F392304A83C8742BE

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. ORRINPAC

Mailing Address PO Box 3986

City
WashingtonState
DCZip Code
20027Purpose of Disbursement
2015 Contribution

011

Candidate Name

ORRINPAC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2015

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2015

Transaction ID : 7C39029E2AE473270A5

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Paul Tonko for CongressMailing Address 911 Central Avenue
221

City Albany State NY Zip Code 12206

Purpose of Disbursement
2016 Primary

011

Candidate Name

Paul David TonkoCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: NY District: 20Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	24	/	2015

Transaction ID : EFA997D11C55541AF6F

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. People for Ben

Mailing Address PO Box 31129

City Santa Fe State NM Zip Code 87594

Purpose of Disbursement
2016 Primary

011

Candidate Name

Ben Ray LujanCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: NM District: 03Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : C3F381B5D3D40BFAAF4

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Renee Ellmers for Congress Committee

Mailing Address PO Box 99567

City Raleigh State NC Zip Code 27624

Purpose of Disbursement
2016 Primary

011

Candidate Name

Renee L. EllmersCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: NC District: 02Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2015

Transaction ID : 740F3F009F6501826CE

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Vote To Elect Republicans Now PAC (VERN PAC)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2015

Mailing Address 22780 Indian Creek Drive, Ste 100

City	State	Zip Code
Dulles	VA	20166

Transaction ID : AB19014D80F9BA6A7B8

Purpose of Disbursement
2015 Contribution

011

Amount of Each Disbursement this Period

Candidate Name

Vote To Elect Republicans Now PAC (VERN PAC)

Category/
Type

1000.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2015
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼
Contribution

State: District:

Full Name (Last, First, Middle Initial)

B. Walorski for Congress Inc

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	24	/	2015

Mailing Address PO Box 954

City	State	Zip Code
Mishawaka	IN	46546-0954

Transaction ID : 6DB0DE9FAEA1B9538CD

Purpose of Disbursement
2016 Primary

011

Amount of Each Disbursement this Period

Candidate Name

Jacqueline Walorski

Category/
Type

1500.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IN District: 02

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶

2500.00

TOTAL This Period (last page this line number only).....▶

29000.00